

# APPLICATION FOR ENDORSEMENT *OR* ENDORSEMENT PLAN (SAEP)

## Business Education (6-8) Endorsement

**This endorsement *ONLY* attaches to  
Basic and Standard Elementary *AND* Basic and Standard Secondary Licenses**

**Credits Required: 16 semester (24 quarter)**

**Transcripts must be attached to verify applicable course work**

Last Name	First Name	Middle Name	Date	SS # or CACTUS ID #		
Home Address			City	State	Zip	Work Phone ( )
Email Address						Home Phone ( )
Current Teaching/License Status						
<input type="checkbox"/> Not Teaching <b>OR</b> Teaching at: (School)_____ (District)_____						
Educator License(s) held: <input type="checkbox"/> Elementary Education <input type="checkbox"/> Secondary Education						
<b>Check only one</b>	<input type="checkbox"/> I am requesting the Business Education (6-8) endorsement. 16 credits have been completed and the appropriate documentation is attached. An endorsement evaluation fee of <b>*\$35.00</b> is enclosed. <b>OR</b>					
	<input type="checkbox"/> I am submitting a State Approved Endorsement Plan (SAEP) for the Business Education (6-8) endorsement. Course requirements will be completed within the timeframe identified in the plan. An endorsement evaluation fee of <b>*\$30.00, paid by my School District</b> , is enclosed.					

This endorsement authorizes the instructor to teach the following approved business courses:  
**(Business) TLC, Keyboarding, and Keyboarding Applications**

Course Information		Credits	Year	Institution	Grade	Course #	Credits
Required	USOE NEW TLC Teacher Training	1					
	Secondary Keyboarding Methods	2-3					
	Internet, Web Page Creation, etc.	2-3					
	Database and/or Spreadsheet Software	2-3					
	Word Processing, Presentations, and/or Desktop Publishing	2-3					
	Multimedia, Networking, Graphics, Programming, etc.	2-3					
Course Information			Year	Institution	Grade	Course #	Credits
Electives	Other (pre-approved by state specialist)	1-4					
Total Credits Required		16	Total Credits				

Signature of Applicant	Date
<b>X</b>	
Submit completed application and official transcripts or other documentation to: Stephanie Ferris, USOE Educator Quality and Licensing, 250 East 500 South, PO Box 144200, Salt Lake City, UT 84114-4200, Phone: (801) 538-7752 <b>\$35.00 endorsement fee or \$30.00 SAEP fee must be included with this application (*see information above)</b>	

----- **Information below to be completed by USOE personnel** -----

Endorsement Recommended	Business Education (6-8)	SAEP approved for _____ years <input type="checkbox"/> SAEP not approved	
		_____ work credits _____ course credits _____ total credits	
		CTE Specialist Signature	Date
		Endorsement Awarded	
		CTE Specialist Signature	Date